PART B - FEE(S) TRANSMITTAL							
Complete and send this form, together with applicable fee(s), to: Mail				Mail Stop ISSU	E FEE		
APR 1 5 2005				P.O. Box 1450	Commissioner for Patents P.O. Box 1450		
, All .				Alexandria, Virginia 22313-1450			
or <u>Fa</u> NSTRUCTIONS This form should be used for transmitting the ISSUE FEE and PU appropriate: All further correspondence including the Patent, advance orders and notifications.				` `			
Animorate Ab further con	below or directed otherwise	Patent, advance or in Block 1, by (a	ders and not specifying	ification of maintenance fees a new correspondence address	will be mailed to the currents; and/or (b) indicating a sep	correspondence address as arate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate o	f mailing can only be used this certificate cannot be used	or domestic mailings of the	
26021 7590 03/09/2005				papers. Each addition	al paper, such as an assignmente of mailing or transmission.	ent or formal drawing, must	
HOGAN & HARTSON L.L.P.					rtificate of Mailing or Tran		
500 S. GRAND AVENUE				I hereby certify that t	his Fee(s) Transmittal is being	ig deposited with the United	
SUITE 1900			I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.				
LOS ANGELES, CA 90071-2611 04/18/2005 DEMMANU2 00000070 09768130				transmitted to the USI	P10 (703) 746-4000, on the	(Depositor's name)	
				F 1100/P/	1/1/2:1//	(Signature)	
01 FC:1501 02 FC:1504	1400.00 DP 300.00 DP			1 X DC: 1	VINESTICOLOR	(Date)	
03 FC:8001	18.00 OP			1/7/11/12	-1 2003	(Date)	
APPLICATION NO.	FILING DATE	FIRST NAMED INVENT		D INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/768,130	01/23/2001		Yasuyuki	Murakami	81942.0008	3323	
APPLN. TYPE	SMALL ENTITY	ISSUE FI	E	PUBLICATION FEE	TOTAL EFF(C) DUE	DATE DUE	
nonprovisional	NO NO	\$1400			TOTAL FEE(S) DUE	DATE DUE	
•				\$300	\$1700	06/09/2005	
EXAMINER		ART UNIT		CLASS-SUBCLASS	J		
SIMITOSKI, MICHAEL J		2134		713-155000			
1. Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list CFR 1.363).						1 & Hactson	
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			or agents OR, alternatively,				
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON T	HE PATENT	(print or type)			
PLEASE NOTE: Unless recordation as set forth in	an assignee is identified be 37 CFR 3.11. Completion of	low, no assignee of this form is NOT	data will app a substitute	ear on the patent. If an assign for filing an assignment.	nee is identified below, the d	locument has been filed for	
(A) NAME OF ASSIGNI	E	(B)) RESIDENC	E: (CITY, and STATE OR CO	UNTRY)		
	ai kabushiki	Kaisha		kyoto,	Japan		
Masao kasa	and Ihara			osaka,	Japan		
Please check the appropriate	assignee category or categor	ries (will not be pri	nted on the p	atent): 🗖 Individual 💆 C	orporation or other private gr	oup entity Government	
4a. The following fee(s) are	enclosed:		Payment of				
☑ Issue Fee ☑ A check in the amount of the fee(s) is enclosed.							
Publication Fee (No small entity discount permitted) Advance Order - # of Copies				Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).			
✓ Advance Order - # of	Copies	<u></u>	The Dire Deposit According	ctor is hereby authorized by count Number	harge the required fee(s), or (enclose an extra c	credit any overpayment, to opy of this form).	
5. Change in Entity Status	from status indicated above						

Authorized Signature Typed or printed name Registration No.

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

interest as shown by the records of the United States Patent and Trademark Office.

□ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).